GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:3336
ANSWERED ON:18.12.2015
Neo-Natal Deaths
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether reportedly 25 per cent of all neo-natal deaths in the world occur in India;

(b) if so, the details thereof and the reasons therefor;

(c) the number of neo-natal deaths reported during each of the last three years and the current year, State/UT-wise; and

(d) the steps taken by the Government in this regard?

Answer

ANSWER
THE MINISTER OF HEALTH AND FAMILY WELFARE
(SHRI JAGAT PRAKASH NADDA)
(a) & (b): Yes, as per United Nations Inter-agency estimates, 2013, India accounts for more than quarter of all neonatal deaths in the world. The main causes for neonatal deaths are prematurity, birth asphyxia and sepsis.
(c): As per Sample registration System (SRS) the reported Neonatal Mortality Rate (NMR) of the last three years and the current year , state/UT- wise is placed at annexure.

(d): Under the National Health Mission, the following key interventions are implemented all over the country to bring down the neonatal mortality:

1. Promoting Institutional delivery through Janani Suraksha Yojna (JSY), a cash incentive scheme for pregnant mothers and Janani Shishu Suraksha Karyakaram (JSSK) which entitles all pregnant women and sick infant to absolutely free and no expense treatment at the public health facilities.

2. Strengthening of delivery points by identifying the "delivery points" for providing comprehensive and quality RMNCH Services at those health facilities.

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3. Strengthening of newborn care services by establishing facilities for care of Sick Newborn such as Special New Born Care Units (SNCUs), New Born Stabilization Units (NBSUs) and New Born Care Corners (NBCCs) and provision of Home based new born care (HBNC) through ASHAs. Guidelines for Use of Antenatal Corticosteroids in preterm labour and Kangaroo Mother care and Optimal feeding in Low birth weight infants for the management of preterm babies have been disseminated to the states.

4. Various trainings in the form of Facility Based Newborn Care (FBNC) training to provide comprehensive care to the sick babies and Navjat Shishu Suraksha Karyakaram (NSSK) to provide essential newborn care is being imparted to medical officers and nurses to build their capacity.

5. Prevention and treatment of Anaemia by supplementation with Iron and Folic Acid tablets during pregnancy and lactation.

6. Name Based Tracking of Pregnant Women to ensure complete antenatal, intranatal, postnatal care and children up to 2 years of age for completing immunization as per UIP schedule.

7. Village Health and Nutrition Days in rural areas as an outreach activity, for provision of maternal and child health services and creating awareness on maternal and child care including health and nutrition education.

8. As breastfeeding reduces infant mortality, early initiation and exclusive breastfeeding for first six months and appropriate infant and young child feeding practices are promoted in convergence with Ministry of Woman and Child Development.

9. To sharpen the focus on vulnerable and marginalized populations in underserved areas, 184 High Priority Districts have been identified for intensification of Reproductive Maternal Newborn Child Health+ Adolescent (RMNCH+A) interventions for achieving improved maternal and child health outcomes.

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Annexure

Trend of Neonatal mortality rate in India, Sample Registration System (SRS)

States	2010	2011	2012	2013
India	33	31	29	28
Andhra Pradesh	30	28	27	25
Assam	33	30	29	27
Bihar	31	29	28	28
Chhattisgarh	37	34	31	31
Delhi	19	18	16	16
Gujarat	31	30	28	26
Haryana	33	28	28	26
Himachal Pradesh	31	28	26	25
Jammu & Kashmir	35	32	30	29
Jharkhand	29	29	27	26
Karnataka	25	24	23	22
Kerala	7	7	7	6
Madhya Pradesh	44	41	39	36
Maharashtra	22	18	18	17
Orissa	42	40	39	37
Punjab	25	24	17	16
Rajasthan	40	37	35	32
Tamil Nadu	16	15	15	15
Uttar Pradesh	42	40	37	35
West Bengal	23	22	22	21